



Office use only

200 Collingwood Street, PO Box 262 Hamilton
Phone 0-7-839 4909, Fax 0-7-839 5780

PLEASE PHONE FOR AN APPOINTMENT

Mr Mrs
Ms Miss

Please attach ACC form/AITC form

X-RAYS

ULTRASOUND

CT SCANNING

☐ Pregnancy
☐ Abdomen
☐ Renal
☐ Pelvis
☐ Thyroid
☐ Breast
☐ Testes
☐ Carotid Doppler
☐ Musculo-Skeletal
☐ Leg Doppler
☐ arterial L R
☐ venous L R
☐ Echocardiography

☐ Brain
☐ Chest
☐ Abdomen/Pelvis
☐ Spine
☐ Sinuses
☐ Pelvimetry
☐ Neck
☐ IAM's
☐ High Res. Chest
☐ Vascular Incl. AAA
☐ Pulmonary Embolus
☐ Renal Colic
☐ Bone Mineral Density

Clinical details

LMP _____

NHI _____

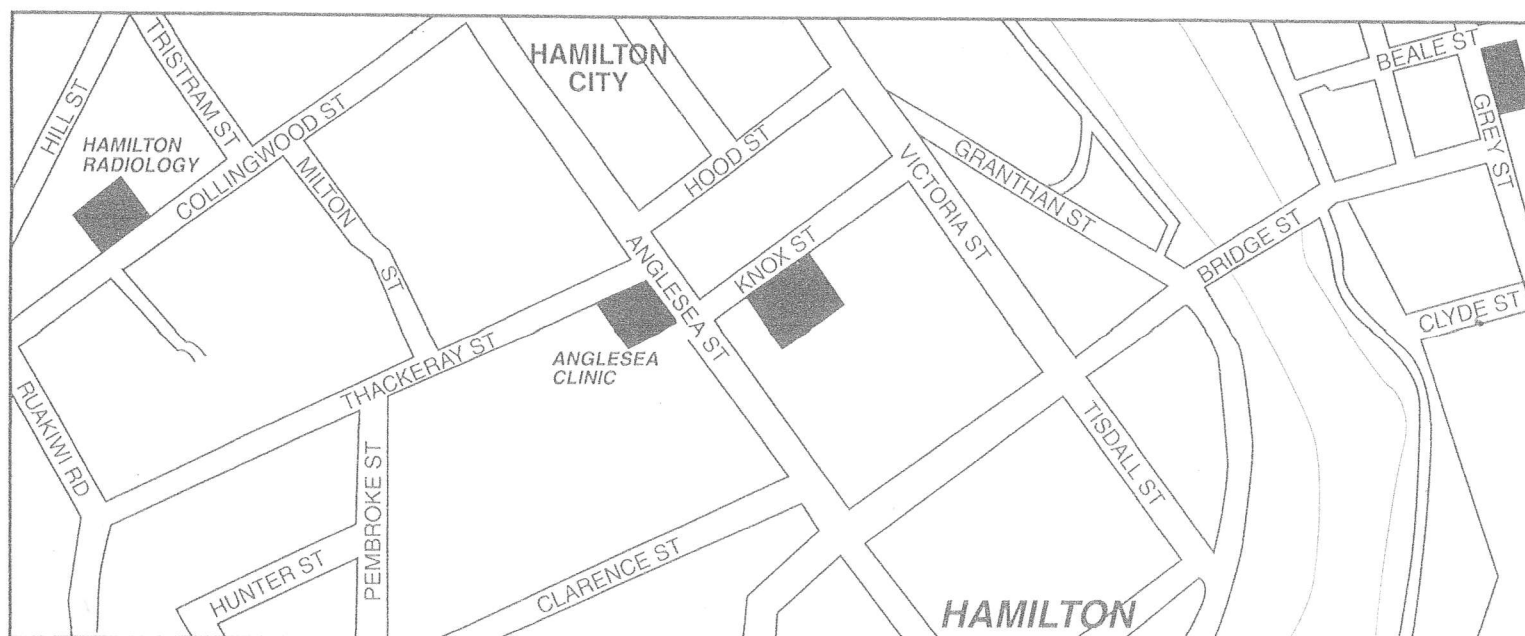
GRAVIDA _____

No. Films _____

Radiographer _____

Rm _____

PLEASE BRING ANY PREVIOUS X-RAYS OR SCANS



HAMILTON

Collingwood Street (Mon-Fri 8am-5pm)

0-7-839 4909

Cnr Anglesea & Thackeray Streets (24 hrs)

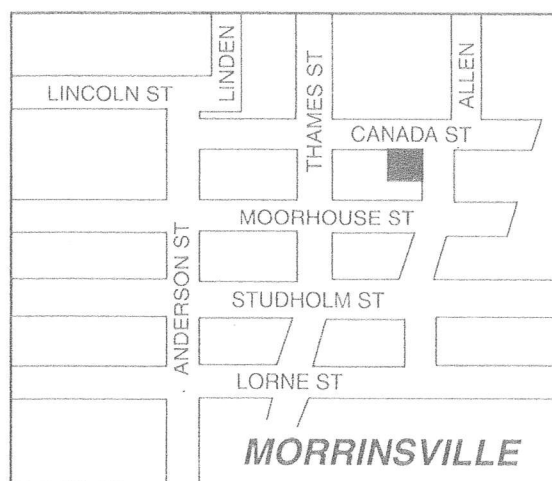
0-7-838 1704

Hamilton East - Beale Street

0-7-839 6896

Anglesea Women's Health Clinic - Knox Street

0-7-838 0351

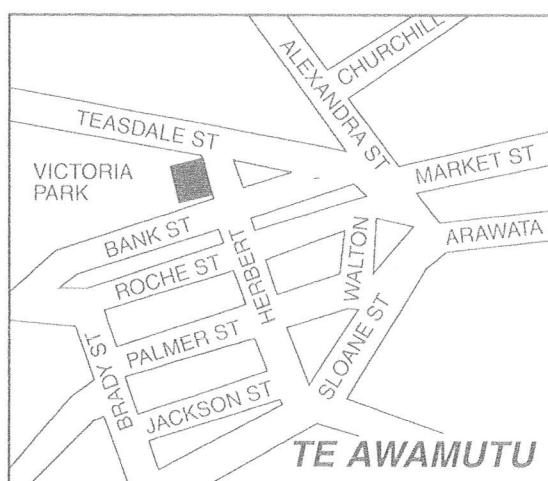


MORRINSVILLE

Canada Street (9am-4.30pm)

(Closed for 1 hour at lunch time)

0-7-889 0022

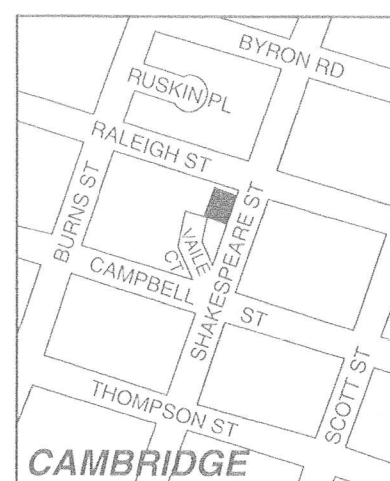


TE AWAMUTU

14 Bank Street (9am-4.30pm)

(Closed for 1 hour at lunch time)

0-7-871 7406



CAMBRIDGE

*127 Shakespeare Street
(9am-4.30pm)*

*(Closed for 1 hour at
lunch time)*

0-7-823 0008